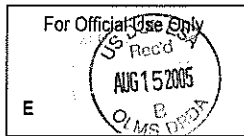


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>7456</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Warren</u> <u>L</u> <u>Mart</u> P.O. Box, Bldg., Room No., if any Street <u>9000 Machinists Place</u> City <u>Upper Marlboro</u> State <u>Maryland</u> ZIP Code + 4 <u>20772</u>	4. Name, file number, and address of labor organization. Name <u>Int'l Assoc. of Machinists & Aerospace Workers</u> Labor Organization File Number <u>000-107</u> P.O. Box, Building and Room Number, if any Street <u>9000 Machinists Place</u> City <u>Upper Marlboro</u> State <u>Maryland</u> ZIP Code + 4 <u>20772</u>
5. Position in labor organization. <u>General Secretary Treasurer</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>Warren L Mart</u>	On <u>8-10-05</u> <u>301-967-4700</u> Date Telephone Number

Name of Person Filing Warren Mart	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input style="width: 80%;" type="text" value="Kelly Press"/></p> <p>Trade Name, if any: <input style="width: 80%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/></p> <p>Street <input style="width: 80%;" type="text" value="1701 Cabin Branch Drive"/></p> <p>City <input style="width: 80%;" type="text" value="Cheverly"/></p> <p>State <input style="width: 20%;" type="text" value="Maryland"/> ZIP Code + 4 <input style="width: 20%;" type="text" value="20785"/></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input style="width: 80%;" type="text"/></p> <p>Trade Name, if any: <input style="width: 80%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/></p> <p>Street <input style="width: 80%;" type="text"/></p> <p>City <input style="width: 80%;" type="text"/></p> <p>State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/></p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 5px; min-height: 60px;"> <p>Company provides printing services to the Union.</p> </div> <p>11.b. Approximate dollar value of such dealing. <input style="width: 100px;" type="text"/></p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> <p>Lunch - 7/23/04, Thanksgiving Turkey, Christmas Turkey, Christmas Ham</p> </div> <p>12.b. Amount. <input style="width: 100px;" type="text" value="\$168"/></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <input style="width: 80%;" type="text"/></p> <p>Trade Name, if any: <input style="width: 80%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/></p> <p>Street <input style="width: 80%;" type="text"/></p> <p>City <input style="width: 80%;" type="text"/></p> <p>State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/></p>	<p>14.a. Nature of payment.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;"> </div>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <input style="width: 100px;" type="text"/></p>

Name of Person Filing Warren Mart

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name K & R Industries

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14110 Sullyfield Circle

City Chantilly

State Virginia

ZIP Code + 4 20151

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

11.a. Nature of such dealing.

Company provides Union Label supplies to the Union.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Dinner - 9/23/04

12.b. Amount.

\$81

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Union Privilege

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1125 15th Street, NW

City Washington

State District of Columbia ZIP Code + 4 20005

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Jeans & Polo shirt

12.b. Amount.

\$57

Name of Person Filing Warren Mart

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Guerrieri, Edmond, Clayman & Bartos, PC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1625 Massachusetts Ave. N.W.

City Washington

State District of Columbia ZIP Code + 4 20036-7420

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Law firm provides legal services to Union.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Fruit Basket

12.b. Amount.

\$42

Name of Person Filing Warren Mart

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name The McLaughlin Company

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1725 DeSales Street, NW

City Washington

State District of Columbia ZIP Code + 4 20036

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

11.a. Nature of such dealing.

Company provides insurance and bonding services to the union.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Dinner - 3/8/04

12.b. Amount.

\$70

Name of Person Filing Warren Mart

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Northern Capital

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 763 Jacqueline Lane

City Palm Harbor

State Florida ZIP Code + 4 34683

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name IAM National Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1300 Connecticut Ave., Ste. 300

City Washington

State District of Columbia ZIP Code + 4 20036

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

11.a. Nature of such dealing.

Company provides investment and financial services to fund.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Dinner - 4/27/04

12.b. Amount.

\$206

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Voyageur Asset Management

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2300 M. Street, N.W., Ste. 800

City Washington

State District of Columbia ZIP Code + 4 20037

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name IAM National Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1300 Connecticut Ave., Ste. 300

City Washington

State District of Columbia ZIP Code + 4 20036

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

11.a. Nature of such dealing.

Firm provides investment management services to the Union.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Dinner - 10/26/04

12.b. Amount.

\$400

Name of Person Filing Warren Mart

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Harbaugh Hotel Group

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1600 N. Indian Avenue

City Palm Springs

State California

ZIP Code + 4 92262

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Company provides conference, lodging, and meeting services to the union.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Fruit and Cheese Basket, Christmas Fruit Basket

12.b. Amount.

\$105

Name of Person Filing Warren Mart

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name O'Donoghue & O'Donoghue

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 4748 Wisconsin Avenue, NW

City Washington

State District of Columbia ZIP Code + 4 20016

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name IAM National Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1300 Connecticut Ave., Ste. 300

City Washington

State District of Columbia ZIP Code + 4 20036

11.a. Nature of such dealing.

Law Firm provides legal services to the Union.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Meals while attending IAM National Pension Fund Meetings (January, March, April, June, July, October)

12.b. Amount.

\$1,246

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Benefit Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1300 Connecticut Ave., Ste. 300

City Washington

State District of Columbia ZIP Code + 4 20036

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

11.a. Nature of such dealing.

Jointly Trusted Fund - Provides health and welfare benefits to IAM represented employees.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

IAM Benefit Trust Fund Meetings (April & October)
Reimbursement of Expenses
Meals while in attendance

12.b. Amount.

\$1,260

Name of Person Filing Warren Mart

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name IAM National Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1300 Connecticut Ave., Ste. 300

City Washington

State District of Columbia ZIP Code + 4 20036

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

11.a. Nature of such dealing.

Jointly Trusted Fund - Provides retirement and pension benefits to IAM represented employees.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

IAM National Pension Fund Meetings (January, March, April, June, & October)

Reimbursement of Expenses and Meals while in attendance.

12.b. Amount.

\$12,033